

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00499020 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 23 / 2014</div> </div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5.49</div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26803 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 23 / 2014</div> </div>		
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 24 / 2014</div> </div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">80.38</div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26804 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 24 / 2014</div> </div>		
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">85.87</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker
[Electronically Filed]

Date

MM / DD / YYYY
04 / 25 / 2014

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C C00499020	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Odd Lamps, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 12076 92nd Ave N		Amount 666.67	
City Maple Grove	State MN	Zip Code 55369	Transaction ID : SE.26805
Purpose of Expenditure IE-Lynch-Online Ads	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 67865.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Odd Lamps, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 12076 92nd Ave N		Amount 333.33	
City Maple Grove	State MN	Zip Code 55369	Transaction ID : SE.26806
Purpose of Expenditure IE-Joyce-Online Ads	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014	
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 67198.98		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1085.87

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R. Russ Walker
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Date

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04 / 25 / 2014

Signature